

POSITION	DATE
CLASSIFIER	19
EXAMINER	38
TYPIST	510
VERIFIER	8
CORPS CORR.	
SPEC. HAND	
FILE MAINT.	
DRAFTING	

# INDEX OF CLAIMS

Claim	Date
Final	Original
1	11
2	10
3	9
4	8
5	7
6	6
7	5
8	4
9	3
10	2
11	1
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SYMBOLS  
✓ ..... Rejected  
- ..... Allowed  
- (Through numerals) Canceled  
+ ..... Restricted  
N ..... Non-elected  
I ..... Interference  
A ..... Appeal  
O ..... Objected

Claim	Date
Final	Original
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